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## **TRANSMITTAL FORM**

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Total Number of Pages in This Submission

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U.S. Patent and Trademark	PTO/SB/21 (09-04) for use through 07/31/2006. OMB 0651-0031 Office; U.S. DEPARTMENT OF COMMERCE a unless it displays a valid OMB control number.	DAV.
Application Number	09/513,997-Conf. #9509	
Filing Date	February 26, 2000	
First Named Inventor	John Joseph HARRINGTON	
Art Unit	1632	
Examiner Name	R. R. Shukla	
Attorney Docket Number	ATX-7CP4DV17RCE	

ENCLOSURES (Check all that apply)					
X Fee Trans	mittal Form	Drawing(s)		After Allowance Communication to TC	
Fee Attached Licensin		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
Amendme	nt/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
After	Final	Petition to Convert to a Provisional Application		Proprietary Information	
Affid	avits/declaration(s)	Power of Attorney, Revocati Change of Correspondence		Status Letter	
x Extension	x Extension of Time Request Terminal Disclaimer			X Other Enclosure(s) (please Identify below):	
Express Abandonment Request		Request for Refund		Return Receipt Postcard	
Information Disclosure Statement CD, Number of CD(s)					
	Certified Copy of Priority Document(s)  Landscape Table on CD				
	Reply to Missing Parts/ Incomplete Application  Remarks				
Reply to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name	· · · · · · · · · · · · · · · · · · ·				
Signature	Signature				
Printed name	Sapna Mehtani, Ph.D., J.D.				
Date	September 6, 2005			56,126	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 913977647 US, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.				
Dated: September 6, 2005	Signature:	Shentam'	(Sapna Mehtani, Ph.D., J.D.)	

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Complete if Known Effective on 12/08/2004. 09/513997 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL February 26, 2000 Filing Date John Joseph HARRINGTON First Named Inventor For FY 2005 R. R. Shukla **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 1632 Art Unit ATX-7CP4DV17RCE **TOTAL AMOUNT OF PAYMENT** 510.00 Attorney Docket No. (\$) METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): X Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES SEARCH FEES FILING FEES Small Entity Small Entity** Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 500 100 Utility 300 150 250 200 200 100 130 65 Design 100 50 200 100 300 150 160 80 Plant Reissue 300 150 500 250 600 300 200 100 0 0 0 0 Provisional 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Indep. Claims **Extra Claims** Fee Paid (\$) 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) **Total Sheets** - 100 = /50 (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00 SUBMITTED BY Registration No. Trowan 56,126 Telephone (617) 227-7400 Signature Name (Print/Type) Sapna Mehtani, Ph.D., J.D. Date September 6, 2005

			xpress Mail, Airbill No. EV 913 977 647 US, VA 22313-1450, on the date shown
Dated: September 6, 2005	Signature:	& mentani	(Sapna Mehtani, Ph.D., J.D.)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005  (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 09/513,997-Conf. #9509 Filed February 26, 2000  For COMPOSITIONS AND METHODS FOR NON-TARGETED ACTIVATION OF ENDOGENOUS GENES  Art Unit 1632 Examiner R. R. Shukla  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 \$  Thom months (37 CFR 1.17(a)(2)) \$450 \$225 \$  Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$510.00  Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$  Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$  X Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  X The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12.0080 in have enclosed a duplicate copy of this sheet.  I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34.  Registration Number Sapplace of record of the entire interest or their representative(s) are required. Submit multiple forms if more hard consequences of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more hard consequences of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more hard conseq	Und	er the Paperwork Reduction /	Act of 1995, no persons are require	ed to respond to a collection		splays a valid OMB control numbe
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Small Entity Fee   Small Entit	identif	ied application.	•	. ,		
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Signature Date  Sapna Mehtani, Ph.D., J.D. (617) 227-7400  Typed or printed name Telephone Number  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					56,126	·
Sapna Mehtani, Ph.D., J.D. (617) 227-7400 Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	_		Mentani		Septe	mber 6, 2005
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than one signature is required, see below.	Typed or printed name Telephone Number					
Total of forms are submitted.						
		Total of	1 forms are subm	itted.		

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Dated: September 6, 2005

Signature: \_

(Sapna Mehtani, Ph.D., J.D.)